Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003  10697367												7	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	EN	ITITY	OR		R THAN ENTITY
Ţ	OTAL CLAIMS	S	10					RATE		FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EΕ	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			(0 minus 20=		*	. —		X\$ 9:			OR	X\$18=	
INI	DEPENDENT C	LAIMS	3 minus 3 =		* /			X43=				X86=	
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT								OR		
* If the difference in column 1 is less than zero, enter "0" in column 2								+145=			OR	+290=	
CLAIMS AS AMENDED - PART II							TOTAL			OR	TOTAL	770	
,		(Column 1)	MENDE	(Column 2) (Column 3)				SMAL	LE	NTITY	OR	OTHER SMALL	
AMENDMENT A	/0/ /31/03	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 10	Minus	-20	2	=		X\$ 9=			OR	X\$18=	
	Independent	- 3	Minus	*** 3	<u> </u>	= /		X43=	1		OR	X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM /							+145=	1		OR	+290=	
TOTAL OD TOTAL												/	
		(Column 1)	ADDIT. FE	<b>- I</b>			ADDIT. FEE						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	ſ	X\$ 9=	T		OR	X\$18=	
	Independent	*	Minus	***		=	t	X43=	+			X86=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+		OR		
							L	+145=	╀		OR	+290=	
									L		OR ,	TOTAL ODIT, FEE	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST													
AMENDMENT C	•	REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA	·	RATE	TI	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	* ##	-	=	I	X\$ 9=			OR	X\$18=	
	Independent	<u></u>	Minus	***		=	t	X43=	t			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<del></del>	+	<del> </del>	OR	7.00-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
	the "Highest Nur the "Highest Nur	nber Previously Pai mber Previously Pai ber Previously Paid	d For IN THIS id For IN THI	S SPACE is I S SPACE is I	ess thar less thai	n 20, enter "20." n 3, enter "3."		TOTAL DDIT. FEE Id in the ap	L			TOTAL DDIT. FEE mn 1.	

FORM PTO-875 (Rev. 10/03)